FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076

OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response.....16.00



Name of Offering (check if this is an amendment and name has changed, and indicate change.)	July Vie
DryerMate Marketing, LLC	PECEIVED
Filing Under (Check box(es) that apply):	N SALOE
Type of Filing: New Filing Amendment	< MOV 1 5 Z006 >>>
A. BASIC IDENTIFICATION DATA	(2)
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
DryerMate Marketing, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
346 Poplar Springs Rd., Magee, MS 39111	(601) 847-6869
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Marketing	
Type of Business Organization	DDOCECCED
☐ corporation ☐ limited partnership, already formed ✓ other (p	olease specify): Luc PROCESSED
business trust limited partnership, to be formed	
Month Year	NOV 2 7 2006
Actual or Estimated Date of Incorporation or Organization: 0 8 0 6 Actual Estin	nated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	E THOMSON
CN for Canada; FN for other foreign jurisdiction)	mig FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or hear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Waltman, Jessie Business or Residence Address (Number and Street, City, State, Zip Code) 346 Poplar Springs Rd., Mendenhall, MS 39114 Check Box(es) that Apply: Promoter Page 1 Reneficial Owner Page 2 Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Bailey, Arlen Business or Residence Address (Number and Street, City, State, Zip Code) 770 J. B. Barnett Rd., Magee, MS 39111 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Bailey, Rachel Business or Residence Address (Number and Street, City, State, Zip Code) 770 J. B. Barnett Rd., Magee, MS 39111 Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Cooper, Chuck Business or Residence Address (Number and Street, City, State, Zip Code) 170 Nub McNair Rd., Magee, MS 39111 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Ware, Daniel D. Business or Residence Address (Number and Street, City, State, Zip Code) 216 1st Ave. NE. Magee, MS 39111 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Russell, Chris Business or Residence Address (Number and Street, City, State, Zip Code) 114 Berry St., PO Box 171, New Hebron, MS 39140 ☐ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					B. I	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer sole	d, or does t	he issuer i	ntend to se	ll, to non-a	iccredited i	nvestors in	this offer	ing?		Yes	No
				Ans	wer also ir	n Appendix	, Column 2	2, if filing	under ULC	E.			
2.	What is	the minim	ium investn	nent that w	vill be acce	pted from	any indivic	lua!?				\$_5,0	00.00
3.	Does th	ne offering	permit join	t ownershi	ip of a sing	gle unit?						Yes	No ⋉
4.	commis If a pers or state	ssion or sim son to be lis s. list the n	illar remune sted is an as:	ration for s sociated pe broker or do	solicitation erson or age caler. If m	of purchas ent of a brol ore than tiv	ers in conn ker or deale e (5) persoi	ection with r registered ns to be list	sales of sec d with the S ed are asso	curities in t SEC and/or	irectly, any he offering, with a state sons of such		
Ful	ll Name (Last name	first, if ind	ividual)								, ,	
Bus	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, 7	Lip Code)						
Nai	me of As	sociated Br	roker or De	aler									
Sta	tes in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)			••••		***************************************	*****************	□ AI	l States
	IL MT RI	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	: Address (1	Number an	d Street, C	City, State.	Zip Code)						
Nar	me of As	sociated Br	oker or De	aler					 				
Sta	tes in Wi	nich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						·
	(Check	"All States	s" or check	individual	States)		,	.,,,		,		□ A1	l States
	AL IL MT	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Vumber an	d Street, C	lity, State,	Zip Code)						
Nai	ne of As	sociated Br	oker or De	aler									
Stat	tes in Wi	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)			***************************************	************	•	•••••••••••••••••••••••••••••••••••••••	☐ Al	States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV		HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this hox and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Aiready e Sold
	Debt	s	\$
	Equity	s	\$
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$ 5,000.00	\$_45,000.00
	Other (Specify)	\$	\$
	Total		\$ 45,000.00
	Answer also in Appendix. Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount of Purchases
	Accredited Investors		- \$
	Non-accredited Investors	•	\$_45,000.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		_ \$
	Regulation A		_ \$
	Rule 504		
	Total		<u>\$</u> 45,000.00
1	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	**********	
	Legal Fees		
	Accounting Fees		
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)		
	Other Expenses (identify)	'	
	Total		0.00

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	and total expenses furnished in response to Part	e offering price given in response to Part C — Question 1 C — Question 4.a. This difference is the "adjusted gros	s	\$5,000.00
5.	each of the purposes shown. If the amount	oss proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and otal of the payments listed must equal the adjusted gros o Part C — Question 4.b above.	j	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		<u></u> \$	s
	Purchase of real estate		\$	
	Purchase, rental or leasing and installation of and equipment	of machinery	\$. 🗆 \$
	Construction or leasing of plant buildings ar	nd facilities		s
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	ne value of securities involved in this e assets or securities of another	□ \$	□\$
				_
			_	_
			\$	s
	Column Totals		\$_0.00	\$ <u>0.00</u>
	Total Payments Listed (column totals added)	s_ <u></u> 0.	00
_		D. FEDERAL SIGNATURE	· · · · · · · · · · · · · · · · · · ·	
igi	nature constitutes an undertaking by the issuer	by the undersigned duly authorized person. If this notice to furnish to the U.S. Securities and Exchange Commin-accredited investor pursuant to paragraph (b)(2) of	ssion, upon writte	
ssu	ner (Print or Type)	Signature	Date	
Dr	yerMate Marketing, LLC			
	ne of Signer (Print or Type)	Title of Signer (Print or Type)		

— ATTENTION —————

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF PI	ROCEEDS	
	and total expenses furnished in response to Part C —			\$
5.	each of the purposes shown. If the amount for an check the box to the left of the estimate. The total o	y purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] \$	<u> </u>
	Purchase of real estate] \$	\$
] \$	<u> </u>
	offering that may be used in exchange for the asse	ets or securities of another	7\$	_ □\$
		-	-	_
		_	=	
] \$	
	Column Totals	······	0.00	
	and total expenses famished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. Payments to Officers, Conficers, Construction or leasing and installation of machinery and equipment. Construction or leasing of plant buildings and facilities. Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer prusuant to a merger). Repayment of indebtedness. Working capital. Other (specify): Scoulum Totals. Total Payments Listed (column totals added). D. FEDERAL SIGNATURE issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Ru atture constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon write information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Total Payments Listed (Print or Type) Signature Payments Listed (Print or Type) Signature Date 11/10/06	00		
		D. FEDERAL SIGNATURE		
ìg	nature constitutes an undertaking by the issuer to fur	nish to the U.S. Securities and Exchange Commiss	ion, upon writte	
SSI	ner (Print or Type)	Sjapature D	ate	
Dr	yerMate Marketing, LLC	I consella la	-1/10/06	
Va	ne of Signer (Print or Type)	Title of Signer (Print or Type)		· · · · · · · · · · · · · · · · · · ·
es	sie Waltman	Managing Member		

ATTENTION ———

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification Yes No provisions of such rule?

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date
DryerMate Marketing, LLC	11/10/06
Name (Print or Type)	Title (Print or Type)
Jessie Waltman	Managing Member

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or hear typed or printed signatures.

	APPENDIX											
ı	Intend to non-a investor	2 I to sell ccredited s in StateItem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 f investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
AL	_											
AK												
AZ												
AR												
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MS	×		membership	0		6	\$45,000.00		×			

	APPENDIX											
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 Tinvestor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
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WA		TV-MINISTER MANAGEMENT										
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WI												

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1		2	3		4					
	to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				lification ate ULOE attach ation of granted) -Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										

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